

(Draft)"). The subcommittee will also address the methodological and operational challenges in developing and running a pregnancy registry. On March 29, 2000, the subcommittee presentations and discussions will address strategies for monitoring drug risks in pregnant women.

Procedure: Interested persons may present data, information, or views, orally or in writing on issues pending before the subcommittee. Written submissions may be made to the contact person by March 14, 2000. On March 28, 2000, oral presentations from the public will be scheduled between approximately 10:15 a.m. and 10:45 a.m. and 2:45 p.m. and 3 p.m. On March 29, 2000, oral presentations from the public will be scheduled between approximately 1:30 p.m. and 2 p.m. Time allotted for each presentation may be limited. Those desiring to make formal oral presentations should notify the contact person before March 14, 2000, and submit a brief statement of the general nature of the evidence or arguments they wish to present, the names and addresses of proposed participants, and an indication of the approximate time requested to make their presentation.

Notice of this meeting is given under the Federal Advisory Committee Act (5 U.S.C. app. 2).

Dated: February 18, 2000.

Linda A. Suydam,

Senior Associate Commissioner.

[FR Doc. 00-4666 Filed 2-28-00; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Care Financing Administration

[HCFA-1127-N]

Medicare Program; Open Public Meeting on March 15, 2000 To Provide an Overview of Data Requirements for Collection of Physician and Hospital Outpatient Encounter Data From Medicare+Choice Organizations for Risk Adjustment

AGENCY: Health Care Financing Administration (HCFA), HHS.

ACTION: Notice of meeting.

SUMMARY: This notice announces a public meeting to provide Medicare+Choice organizations, providers, practitioners, and other interested parties an overview of data requirements for physician and hospital outpatient encounter data. The meeting will address the following topics:

- Basic data requirements for physician encounter data.
- Basic data requirements for hospital outpatient encounter data.
- Update on training and customer support services.

DATES: The meeting is scheduled for March 15, 2000 from 9 a.m. until 4 p.m., e.s.t.

ADDRESSES: The meeting will be held in the HCFA Auditorium, 7500 Security Boulevard, Baltimore, Maryland, 21244-1850.

FOR FURTHER INFORMATION CONTACT: Ann Barcome, (301) 519-6700, encounterdata@aspensys.com.

SUPPLEMENTARY INFORMATION:

Background

The Balanced Budget Act of 1997 (BBA) (Pub. L. 105-33) established the Medicare+Choice program. Under the BBA, HCFA must implement a risk adjustment methodology that accounts for variations in per capita costs based on health status and other demographic factors for payment to Medicare+Choice organizations (M+COs). Risk adjustment implementation must start no later than January 1, 2000.

The BBA also gives HCFA the authority to collect inpatient hospital data for discharges on or after July 1, 1997, and additional data for services occurring on or after July 1, 1998. The schedule for physician and hospital outpatient encounter data submission is as follows:

- October 1, 2000: Submission of physician data begins.
- January 1, 2001: Submission of hospital outpatient data begins with dates of services retroactive to October 1, 2000.

This notice announces a public meeting to provide an opportunity for M+COs, providers, practitioners, and other interested parties to obtain basic information on the data requirements for the collection of physician and hospital outpatient encounter data. HCFA intends to provide additional information on our data collection efforts, systems processes, training approach, and customer services. HCFA will also follow-up this meeting with intensive training in the areas of physician and hospital outpatient encounter data that will occur in June and September, respectively.

HCFA is announcing this public meeting to provide an overview of physician and hospital outpatient data and to allow for individuals and organizations familiar with issues related to physician and hospital outpatient data collection to raise questions that can be answered in

subsequent training. The agenda will include short presentations by HCFA staff and Aspen Systems Corporation, the encounter data training contractor, on related topics and will conclude with a question-and-answer session.

Registration

Registration for this public meeting is required and will be on a first-come, first-serve basis, limited to two attendees per organization. A waiting list will be available for additional requests. Registration will be done via the Internet at www.hcfa.gov/events or by paper forms available at the aforementioned Internet address. A confirmation notice will be sent to attendees upon finalization of registration.

Attendees will be provided with meeting materials at the time of the meeting. We will accept written questions or requests for meeting materials either before the meeting or up to 14 days after the meeting. Written submissions must be sent to: Aspen Systems Corporation, ATTN: Ann Barcome, 2277 Research Boulevard, Rockville, Maryland 20850. You may contact Ann Barcome at: Telephone Number: (301) 519-6700, Fax Number: (301) 519-6360, E-mail: encounterdata@aspensys.com.

(Authority: Sections 1851 through 1859 of the Social Security Act (42 U.S.C. 1395w-21 through 1395w-28))

(Catalog of Federal Domestic Assistance Program No. 93.773 Medicare—Hospital Insurance Program; and No. 93.774, Medicare—Supplementary Medical Insurance Program)

Dated: February 18, 2000.

Nancy-Ann Min DeParle,

Administrator, Health Care Financing Administration.

[FR Doc. 00-4670 Filed 2-28-00; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Services Administration

Agency Information Collection Activities; Proposed Collection; Comment Request

In compliance with the requirement for opportunity for public comment on proposed data collection projects (section 3506(c)(2)(A) of Title 44, United States Code, as amended by the Paperwork Reduction Act of 1995, Public Law 104-13), the Health Resources and Services Administration (HRSA) publishes periodic summaries

of proposed projects being developed for submission to OMB under the Paperwork Reduction Act of 1995. To request more information on the proposed project or to obtain a copy of the data collection plans and draft instruments, call the HRSA Reports Clearance Officer on (301) 443-1129.

Comments are invited on: (a) Whether the proposed collection of information is necessary for the proper performance of the functions of the agency, including whether the information shall have practical utility; (b) the accuracy of the agency's estimate of the burden of the proposed collection of information; (c)

ways to enhance the quality, utility, and clarity of the information to be collected; and (d) ways to minimize the burden of the collection of information on respondents, including through the use of automated collection techniques or other forms of information technology.

Proposed Project: The Health Education Assistance Loan (HEAL) Program: Forms (OMB No. 0915-0034) Extension. This clearance request is for extension of approval for four HEAL forms: the Lender's Application for Contract of Federal Loan Insurance (used by lenders to make application to

the HEAL insurance program); the Lender's Manifest (used by the lender to report recent HEAL loan activity); the Loan Transfer Statement (used by the lender to report the transfer of a HEAL loan); and the Borrower Status Request (completed by the borrower and the borrower's employer and used by the lender to determine eligibility for deferment). The reports assist the Department in protecting its investment in this loan insurance program.

The estimate of burden for the forms are as follows:

| HRSA form | Number of respondents | Responses per respondent | Total responses | Hours per response | Total burden hours |
|--|-----------------------|--------------------------|-----------------|--------------------|--------------------|
| Lender's application for contract of Federal loan insurance. | 32 | 1 | 32 | 8 min | 4 |
| Lender's manifest | 9 | 331 | 2,979 | 5 min | 247 |
| Loan transfer statement | 32 | 265 | 8,480 | 10 min | 1,408 |
| Borrower status request: | | | | | |
| Borrowers | 12,180 | 1 | 12,180 | 10 min | 2,022 |
| Employers | 7,550 | 1.613 | 12,180 | 5 min | 1,011 |
| Total | 19,803 | | 35,851 | | 4,692 |

Send comments to Susan G. Queen, Ph.D., HRSA Reports Clearance Officer, Room 14-33, Parklawn Building, 5600 Fishers Lane, Rockville, MD 20857. Written comments should be received within 60 days of this notice.

Dated: February 23, 2000.

Jane Harrison,

Director Division of Policy Review and Coordination.

[FR Doc. 00-4732 Filed 2-28-00; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Health Resources and Services Administration

Agency Information Collection Activities: Submission for OMB Review; Comment Request

Periodically, the Health Resources and Services Administration (HRSA) publishes abstracts of information collection requests under review by the Office of Management and Budget, in compliance with the Paperwork Reduction Act of 1995 (44 U.S.C. Chapter 35). To request a copy of the clearance requests submitted to OMB for review, call the HRSA Reports Clearance Office on (301)-443-1129.

The following request has been submitted to the Office of Management and Budget for review under the Paperwork Reduction Act of 1995:

Proposed Project: The Uniform Progress Report (UPR) for HRSA Continuation Training Grants (OMB No. 0915-0061)—Revision

The HRSA Progress Reports for Continuation Training Grants are used for the preparation and submission of continuation applications for Title VII and VIII health professions and nursing education and training programs. The Bureau of Health Professions (BHP) Uniform Progress Report measures grantee success in meeting (1) the objectives of the grant project and (2) the cross-cutting outcomes developed for BHP's education and training programs. The first part of the progress report is designed to collect information to determine whether sufficient progress has been made on the approved project objectives, as grantees must demonstrate satisfactory progress to warrant continuation of funding. The second part of the progress report contains selected tables from the Comprehensive Performance Management System (CPMS) reflecting the seven indicators that have been identified. Progress will be measured based on the objectives of the grant project and outcome measures and indicators developed by BHP to meet requirements of the Government Performance and Results Act (GPRA).

To respond to the requirements of GPRA, BHP developed goals, outcomes and indicators that provide a framework for collection of outcome data for its Titles VII and VIII programs. An

outcome based performance system is critical for measuring whether program support is meeting national health workforce objectives. At the core of the performance measurement system are found cross-cutting goals with respect to workforce quality, supply, diversity and distribution of the health professions workforce. A demonstration project to assess availability of the data needed to support the indicators was conducted, and data from this project are currently being analyzed. The progress report will be completely automated in fiscal year 2000, allowing the grantees to obtain, complete, and submit the report electronically.

The burden estimate is as follows:

Form:

Progress Report.

Number of Respondents: 626.

Response per Respondent: 1.

Total Responses: 626.

Hours per Response: 21.5.

Total Burden Hours: 13,459.

Written comments and recommendations concerning the proposed information collection should be sent within 30 days of this notice to: Wendy A. Taylor, Human Resources and Housing Branch, Office of Management and Budget, New Executive Office Building, Room 10235, Washington, DC 20503.